PEABODY MANOR

2500 HERITAGE WOODS DE

APPLETON 54915 Phone: (920) 733-3724	<u> </u>	Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/04):	58	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	58	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	57	Average Daily Census:	56

Services Provided to Non-Residents	Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/04)	Length of Stay (12/31/04)	%	
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	ૄ	Age Groups	%	Less Than 1 Year 1 - 4 Years	38.6 42.1
Supp. Home Care-Household Services	No l	Developmental Disabilities	0.0	 Under 65	0.0	1 - 4 lears More Than 4 Years	19.3
Day Services	No	Mental Illness (Org./Psy)	35.1	65 - 74	7.0	More man rears	
Respite Care	Yes	Mental Illness (Other)	3.5	75 - 84	19.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	43.9	*******	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	29.8	Full-Time Equivalent	5
Congregate Meals	No	Cancer	1.8			Nursing Staff per 100 Res	sidents
Home Delivered Meals	No	Fractures	1.8		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	8.8	65 & Over	100.0		
Transportation	No	Cerebrovascular	8.8			RNs	15.8
Referral Service	No	Diabetes	0.0	Gender	%	LPNs	5.5
Other Services	Yes	Respiratory	5.3			Nursing Assistants,	
Provide Day Programming for	ĺ	Other Medical Conditions	35.1	Male	17.5	Aides, & Orderlies	47.8
Mentally Ill	No			Female	82.5		
Provide Day Programming for	ĺ		100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	!		amily Care			Managed Care	Į.		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	4.5	147	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Skilled Care	7	100.0	321	18	81.8	126	0	0.0	0	27	100.0	170	0	0.0	0	1	100.0	219	53	93.0
Intermediate				3	13.6	106	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	5.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		22	100.0		0	0.0		27	100.0		0	0.0		1	100.0		57	100.0

PEABODY MANOR

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit:	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%		sistance of		Number of
Private Home/No Home Health	2.4	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		82.5	17.5	57
Other Nursing Homes	1.9	Dressing	8.8		77.2	14.0	57
Acute Care Hospitals	94.3	Transferring	12.3		80.7	7.0	57
Psych. HospMR/DD Facilities	0.0	Toilet Use	10.5		77.2	12.3	57
Rehabilitation Hospitals	0.0	Eating	77.2		17.5	5.3	57
Other Locations	1.4	******	******	*****	******	*******	*****
Total Number of Admissions	209	Continence		8	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	0.0	Receiving Resp	iratory Care	19.3
Private Home/No Home Health	40.6	Occ/Freq. Incontiner	nt of Bladder	61.4	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	43.0	Occ/Freq. Incontiner	nt of Bowel	19.3	Receiving Suct	ioning	0.0
Other Nursing Homes	1.0	_			Receiving Osto	my Care	3.5
Acute Care Hospitals	3.9	Mobility			Receiving Tube	Feeding	1.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.5	Receiving Mech	anically Altered Diets	15.8
Rehabilitation Hospitals	0.0				5	•	
Other Locations	2.4	Skin Care			Other Resident C	haracteristics	
Deaths	9.2	With Pressure Sores		10.5	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		1.8	Medications		
(Including Deaths)	207				Receiving Psyc	hoactive Drugs	47.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

************	******	*****	*****	*****	*****	*****	*****	*****	*****
		Own	ership:	Bed	Size:	Lic	ensure:		
	This	This Nonprofit		50	-99	Ski	lled	Al	1
	Facility	Peer	Peer Group		Group	Peer	Group	Faci	lities
	%	%	Ratio	૪	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.6	92.7	1.04	89.0	1.08	90.5	1.07	88.8	1.09
Current Residents from In-County	22.8	84.6	0.27	81.8	0.28	82.4	0.28	77.4	0.29
Admissions from In-County, Still Residing	2.4	20.5	0.12	19.0	0.13	20.0	0.12	19.4	0.12
Admissions/Average Daily Census	373.2	153.0	2.44	161.4	2.31	156.2	2.39	146.5	2.55
Discharges/Average Daily Census	369.6	153.6	2.41	163.4	2.26	158.4	2.33	148.0	2.50
Discharges To Private Residence/Average Daily Census	308.9	74.7	4.14	78.6	3.93	72.4	4.27	66.9	4.62
Residents Receiving Skilled Care	94.7	96.9	0.98	95.5	0.99	94.7	1.00	89.9	1.05
Residents Aged 65 and Older	100	96.0	1.04	93.7	1.07	91.8	1.09	87.9	1.14
Title 19 (Medicaid) Funded Residents	38.6	54.6	0.71	60.6	0.64	62.7	0.62	66.1	0.58
Private Pay Funded Residents	47.4	32.6	1.45	26.1	1.81	23.3	2.04	20.6	2.30
Developmentally Disabled Residents	0.0	0.5	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	38.6	37.4	1.03	34.4	1.12	37.3	1.03	33.6	1.15
General Medical Service Residents	35.1	20.2	1.73	22.5	1.56	20.4	1.72	21.1	1.67
Impaired ADL (Mean)	44.9	50.1	0.90	48.3	0.93	48.8	0.92	49.4	0.91
Psychological Problems	47.4	58.4	0.81	60.5	0.78	59.4	0.80	57.7	0.82
Nursing Care Required (Mean)	6.6	7.0	0.95	6.8	0.96	6.9	0.96	7.4	0.89